

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/554301

FILING DATE

OCT 2006

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	2		2			
4	1	1	1	1		
5	1	1	1	1		
6	1		1			
7	1		1			
8	1		3			
9	1		1			
10	1		2			
11	1	1	1	2		
12	1		1			
13	1	1	1	1		
14	1	1	3	3		
15	1	1	3	3		
16	1	1	1	1		
17	1	1	3	3		
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TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	17	↔	25	↔		↔
TOTAL CLAIMS	19	████████	27	████████	████████	████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS		████████		████████	████████	████████

BEST AVAILABLE COPY